

JUN 17 1971

DATE: June 10, 1971

To : Joshua Lederberg, Ed Feigenbaum, and Elliott Levinthal

FROM : Ron Jamtgaard



SUBJECT: Initial NIH Response to Annual Report

I spoke today with Marty Blumsack, an assistant to Bill Raub who is head of Research Resources Branch at NIH. I asked him for an initial reaction to our Annual Report. He provided me with the following comments:

- 1) Grant Extension Request: NIH rules permit extensions without funds up to 12 months at a time with multiple extensions possible. Extensions with funds, however, are available only once and can be made for a maximum of 12 months. Thus our request for a 15 month extension with funds must be reduced to no more than 12 months.

He pointed out that extensions with funds are possible but rarely given. A review process of some kind will be necessary. Extensions must be cleared by the Division Directors office. Therefore, Dr. Raubs office must prepare a thorough justification of the extension and submit it to his director for approval. To prepare this rationale, Mr. Blumsack assumed that a review group would be formed by staff persons from the Research Resources Branch plus one or more consultants who would visit Stanford and prepare recommendations. The staff personnel in Raub's office have an initial reaction to our extension request which is favorable.

- 2) Dr. Harrison's Arrhythmia Detection Project: The initial reaction from the Research Resources Branch is not favorable. It was felt that the program had a significant cost and that primarily due to its size, would require a competitive review. There was also some questions about the uniqueness or innovative attributes of the project. Therefore, he said that it was unlikely that the Research Resource Branch option of allowing service income to be used to support this task would be approved. This view reflects an initial pass of the Annual Report. A more definitive statement concerning this project will be available at approximately one week. A review of the entire Annual Report by Dr. Raub's staff is to be concluded on Wednesday, June 16.
- 3) Some general comments on the proposal were as follows: In effect, the Annual Progress Report is like a work proposal or application. It will be read by persons within and outside of NIH. Marty Blumsack felt that ACME had not painted the best possible picture of ACME as a resource in its Annual Report. Perhaps we should have placed our best foot forward more emphatically. He also mentioned that the specific user projects which we highlighted did not touch upon some of the strongest political issues of the

day such as cancer. It also lacks some of the global direction statements which would help the Research Resources Branch to justify to others within NIH the continued support for ACME. Parts of the report were found to be very operations oriented.

He indicated that Bill Raub or a new assistant branch chief, who may be appointed in the very near future, will visit Stanford within the next month sometime.

I asked him how early a separate proposal covering the Arrhythmia Detection work of Dr. Harrison could be reviewed. He indicated that a proposal submitted in the next two weeks to Dr. Samuel Swartz in DRG with a letter requesting waiver of the June 1 deadline could possibly be considered in the November Council.

ACME has proposed the use of service income to support local development tasks. Mechanically this does not fit the NIH scheme. He indicated that our cost ceiling could be increased to a higher level to achieve this goal but that income would have to be used as an offset to the total operating cost budget. I indicated that we would discuss this further with Dr. Raub on his visit.

cc: C. Dickens
D. Harrison